Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Influence of the complete items of the reverse so that we can return the card to you.  Richard Allen, ALDOC 64 N. Union Street Montgomery, AL 36130	
2. Article Number (Transfer from service label) 7005 1	4. Restricted Delivery? (Sides 5 Delivery) (Sides 5
PS Form 3811 February 2004	stic Return Receipt 102595-02-M-1540